

IPEA/

PCT
DEMAND

14 DEC 2004

CHAPTER II

under Article 31 of the Patent Cooperation Treaty:

The undersigned requests that the international application specified below be the subject of international preliminary examination according to the Patent Cooperation Treaty and hereby elects all eligible States (except where otherwise indicated)

For international Preliminary Examining Authority use only

Identification of IPEA

Date of receipt of DEMAND

Box No. I IDENTIFICATION OF THE INTERNATIONAL APPLICATION

Applicant's or agents file reference

VS:FP18189

International application No.

PCT/AU03/00972

International filing date (day/month/year)

31 July 2003

(Earliest) Priority date (day/month/year)

1 August 2002

Title of the invention

METHOD AND COMPOUNDS FOR PROMOTING HEALING AND REDUCING
INFLAMMATION

Box No. II APPLICANT(S)

Name and address: (Family name followed by given name; for a legal entity, full official designation.
The address must include postal code and name of country) NOTE

Telephone No.

Facsimile No.

Teleprinter No.

BIODIEM LTD

LEVEL 10

ATRIUM BUILDING

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☒ Further applicants are indicated on a continuation sheet.

Continuation of Box No. II APPLICANT(S)

If none of the following sub-boxes are used, then this sheet should not be included in the demand (renumber pages accordingly).

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country)*

GAVROVSKAYA, Luidmila, Konstantinovna
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State *(that is, country)* of nationality:
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State *(that is, country)* of residence:
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State *(that is, country)* of nationality:

State *(that is, country)* of residence:

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country)*

State *(that is, country)* of nationality:

State *(that is, country)* of residence:

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country)*

State *(that is, country)* of nationality:

State *(that is, country)* of residence:

☐ Further applicants are indicated on a continuation sheet.

Box No. III AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE

The following person is ☒ agent ☐ common representative
 and ☒ has been appointed earlier and represents the applicant(s) also for international preliminary examination.
☐ is hereby appointed and any earlier appointment of (an) agent(s)/common representative is hereby revoked
☐ is hereby appointed, specifically for the procedure before the International Preliminary Examining Authority, in addition to the agent(s)/common representative appointed earlier.

Name and address: (Family name followed by given name; for a legal entity, full official designation.
 The address must include postal code and name of country)

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☐ **Address for correspondence:** Mark this checkbox where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

Box No. IV BASIS FOR INTERNATIONAL PRELIMINARY EXAMINATION**Statement concerning amendments***

1. The applicant wishes the international preliminary examination to start on the basis of:
 - ☒ The international application as originally filed
 - the description ☐ as originally filed
☐ as amended under Article 34
 - the claims ☐ as originally filed
☐ as amended under Article 19 (together with any accompanying statement)
☐ as amended under Article 34
 - the drawings ☐ as originally filed
☐ as amended under Article 34
2. ☐ The applicant wishes any amendment to the claim under Article 19 to be considered reversed.
3. ☐ The applicant wishes the start of the international preliminary examination to be postponed until the expiration of 20 months from the priority date unless the International Preliminary Examining Authority receives a copy of any amendments made under article 19 or a notice from the applicant that he does not wish to make such amendments (Rule 69.1(d)). (This checkbox may be marked only where the limit under Article 19 has not yet expired).

* Where no checkbox is marked, international preliminary examination will start on the basis of the international application as originally filed or, where a copy of amendments to the claims under article 19 and/or amendments of the international application under Article 34 are received by the International Preliminary Examining Authority before it has begun to draw up a written opinion or the international preliminary examination report, as so amended.

Language for the purpose of international preliminary examination: ENGLISH

- ☒ which is the language in which the international application is filed
☐ which is the language of a translation furnished for the purposes in international search
☐ which is the language of publication of the international application
☐ which is the language of the translation (to be) furnished for the purposes of international preliminary examination.

Box No. V ELECTION OF STATES

The applicant hereby elects all eligible states (that is, all states which have been designated and which are bound by chapter II of the PCT)
 Excluding the following states which the applicant does not wish to elect:

Box no. VI CHECK LIST

The demand is accompanied by the following elements, in the language referred to in Box No. IV, for the purposes of international preliminary examination:

For International Preliminary
Examining Authority use only

received

not received


- | | |
|--|--------|
| 1. translation of international application: | sheets |
| 2. amendments under Article 34: | sheets |
| 3. copy (or where required, translation) of amendments under Article 19: | sheets |
| 4. copy (or where required, translation) of statement under Article 19: | sheets |
| 5. letter: | sheets |
| 6. other (<i>specify</i>): | sheets |

The demand is accompanied by the item(s) marked below:

- | | |
|--|---|
| 1. <input type="checkbox"/> fee calculation sheet | 4. <input type="checkbox"/> statement explaining lack of signature |
| 2. <input type="checkbox"/> separate signed power of attorney | 5. <input type="checkbox"/> nucleotide and or amino acid sequence listing in computer readable form |
| 3. <input type="checkbox"/> copy of general power of attorney; reference number, if any: | 6. <input type="checkbox"/> other (<i>specify</i>): |

Box No. VII SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE

Next to each signature indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the demand)


Signature

05/02/04
Date

Dr Vivien Santer of Griffith Hack for and behalf of the applicant(s)

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1. Date of actual receipt of DEMAND:
2. Adjusted date of receipt of demand due to CORRECTIONS under Rule 60.1(b):
3. ☐ The date of receipt of the demand is AFTER the expiration of 19 months from the priority date and item 4 or 5, below, does not apply ☐ The applicant has been informed accordingly
4. ☐ The date of receipt of the demand is WITHIN the period of 19 months from the priority date as extended by virtue of rule 80.5
5. ☐ Although the date of receipt of the demand is after the expiration of 19 months from the priority date, the delay in arrival is EXCUSED pursuant to Rule 82.

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Demand received from IPEA on: